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Our Docket No: 42P12482

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE CIVILED 317	11201711	DIVI III	VD TRAIDEIV	
In re Application of:	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Ado)	Examiner:	Iqbal, Nadeem
Application No: 10/038,843)	Art Unit:	2114
Filed: January 2, 2002)		
For: Automatic Testing for M Architecture	ulti-Core) 		
	AME	NDMEN	T	
Mail Stop: Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				
Sir:				
In response to the Office	Action ma	ailed Oct	ober 12, 2004	, applicant respectfully
requests the Examiner to enter th	e followin	ig amend	ments and to	consider the following
remarks.				;
FIRS1	Γ CLASS CER	TIFICATE	OF MAILING	
I hereby certify that I am causing the above-refectless mail with sufficient postage on the date in Patents, P.O. Box 1450, Alexandria, VA 22313-1	dicated below a			
		nber 19, 2004		
	Date	of Deposit		
	Leah	Schwenke		
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Complete if Known Application Number 10/038,843 January 2, 2002 Filing Date Ayman G. Abdo Effective 10/01/2004. Patent fees are subject to annual revision. First Named Inventor **Examiner Name** Iqbal, Nadeem Applicant claims small entity status. See 37 CFR 1.27. 2114 Art Unit TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. 42390P12482

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES								
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None ☐ Deposit Account		Large Entity Small			ntity				
		Fee							
Deposit Account 02-2666	Code	(\$)	Code	(\$)	Fee	Description	Fee Pa	aid	
Account Number 02-2666	1051	130	2051	65	Surcharge - late filing	fee or oath		\neg	
Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP		50	2052	25	Surcharge - late prov	isional filing fee or		_	
				130	Non-English specifica	cover sheet.			
The Commissioner is authorized to: (check all that apply)		130 2,520	2053 1812	2,520		For filing a request for ex parte reexamination			
Charge fee(s) indicated below Credit any overpayments	1804	920 •	1804	920 *	Requesting publication	on of SIR prior to		-	
Charge any additional fee(s) or underpayment of fees as required under 37			Ì		Examiner action			_	
CFR §§ 1.16, 1.17, 1.18 and 1.20.	1805	1,840*	1805	1,840	Requesting publication Examiner action	on of SIR after			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account	1251	110	2251 55		Extension for reply within first month			_	
FEE CALCULATION		430	2251	215	Extension for reply within second month				
BASIC FILING FEE	1252	980	2252	490	Extension for reply wi			[[
Large Entity Small Entity	1253 1254	1,530	2253	765	Extension for reply wi				
Fee Fee Fee Fee Fee Description Fee Paid	1254	2,080	2255	1,040	Extension for reply wi			_	
Code (\$) Code (\$)	1404	340	2401	170	Notice of Appeal				
1001 790 2001 395 Utility filing fee	1402	340	2402	170	Filing a brief in suppo	ut of an anneal		[]	
1002 350 2002 175 Design filing fee	1403	300	2402	150	Request for oral hear		<u> </u>		
1003 550 2003 275 Plant filing fee	1403	1,510	2403	1,510	Petition to institute a	-	lina		
1004 790 2004 395 Reissue filing fee	1451	110	2451	55	Petition to revive - un		""' ⁹	-[[
1005 160 2005 80 Provisional filing fee	i .	1,370		685	Petition to revive - un		<u> </u>		
SUBTOTAL (1) (\$)	1453	1,370	2453	685	Utility issue fee (or re		<u> </u>		
2 EVIDA OLAIM FEEC	1501 1502	490	2501 2502	245	Design issue fee	issue)		—[]	
2. EXTRA CLAIM FEES Extra Fee from Claims below Fee Paid	1503	660	2503	330	Plant issue fee				
Total Claims 25 25 _ 0 x 18.00 = \$0.00	1460	130	2460	130	Petitions to the Comm	nissioner			
Independent Claims 5 5 = 0 x 88.00 = \$0.00	1807	50	1807	50	Prosessing fee under				
Multiple Dependent	1806	180	1806	180	Submission of Inform		·m·		
Large Entity Small Entity	8021	40	8021	40	Recording each pater				
Fee Fee Fee Fee Description					property (times numb				
Code (\$) Code (\$)	1809	790	1809	395	Filing a submission af	ter final rejection		-	
1202 18 2202 9 Claims in excess of 20					(37 CFR § 1.129(a))			[[
1201 88 2201 44 Independent claims in excess of 3	1810	790	2810	395		For each additional invention to be examined (37 CFR § 1.129(b))			
1203 300 2203 150 Multiple Dependent claim, if not paid	1801	790	2801	395	Request for Continued	E)			
1204 88 2204 44 **Reissue independent claims over original patent		900	1802		<i>'</i>	Request for expedited examination			
1205 18 2205 9 "Reissue claims in excess of 20 and over					of a design application				
original patent	Other fee (specify)								
SUBTOTAL (2) (\$) (0.00	* Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$)				
**or number previously paid, if greater, For Reissues, see below				d					
SUBMITTED BY						Comp	lete (if applicable)	一	
	R	egistratio	n No.	T	16 222		(303) 740-1980	\Box	
Name (Print/Type) Mark L. Watso	(Attorney/Agent)			4	6,322	Telephone	(303) /40-1980		
Signature						Date	11/19/04		